



TOWN OF HANOVER
550 HANOVER STREET, SUITE 29
HANOVER, MASSACHUSETTS 02339
781-826-2261 781-826-5010



SPECIAL ("One-Day") ALCOHOL LICENSE APPLICATION

Check one: Non-profit - Fee \$40.00 (X) For-profit - Fee \$75.00 ()

Check one: All Alcohol () Wine & Malt (X) Malt Only () Wine Only ()

PLEASE PRINT LEGIBLY

*Applicant's Name: Lindsey Jevne

* Applicant must be a person (not an entity). For an All-Alcohol License, the applicant must be a person who represents a non-profit organization.

Applicant's Street Address: 316 Washington St, Norwell, MA 02061

Daytime Contact #: 781-413-7612 Applicant's E-mail Address: ljjeve@gmail.com

Name/Purpose of Event: Great River Race award ceremony / fundraiser

Event Date: August 11, 2018 Requested Hours of Sale: 1-4

Event Location Street Address: Luddams Ford Park

Organization sponsoring event: NSRWA: North South River

Organization's Street Address: 214 South Street, Norwell, MA 02061

Number of People Expected to Attend Event (including staff & volunteers): 150-200

Server/Caterer Name: Independent Fermentations Brewing, LLC

Name of Liquor License Holder (Attach copy of license): " " "

Have servers had training in Alcohol service? X If yes, attach copies of proof of training

Do you have liquor liability insurance? X If yes, attach a copy of your certificate of liability insurance

Has permission been received from the property owner to hold this event? yes

I, the undersigned, understand and agree to the restriction and responsibilities of holding a One-Day Alcohol License and certify that I am not prohibited from holding such license. I agree that the Town of Hanover is in no way responsible for the actions of the applicant.

[Signature]
Applicant's Signature

5/14/18
Date Filed

Chairman - Board of Selectmen

Date Approved



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/26/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Hollis Insurance Agency Inc The Pinehills 1 Village Green North STE 121 Plymouth MA 02360	CONTACT NAME: Diane Briggs, CISR PHONE (A/C, No, Ext): (508) 209-0400 E-MAIL ADDRESS: dbriggs@hollisagency.com FAX (A/C, No): (508) 209-0444
INSURED Independent Fermentations Brewing, LLC 54 Pawtuxet Rd Plymouth MA 02360	INSURER(S) AFFORDING COVERAGE INSURER A: Ohio Security Ins INSURER B: Hartford Fire Ins. Co. INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: CL1742606073

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		BK557256085	4/21/2017	4/21/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Data Compromise Defense \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N n	N/A	08WECCT8200	8/1/2017	8/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Balboni Companies is an 6Additional Insured under the comprehensive general liability policy.
Balboni Companies consists of the following companies:

Balboni Development Corp., Balboni Landscape Supply, Commercial Design Assoc. Inc., Balboni Bros. Inc., Hooterville LLC, Waterview Park LLC, Balboni LLC, Ballossi LLC, Liberty Realty Trust, & JAB Realty Trust.

CERTIFICATE HOLDER

CANCELLATION

Balboni Companies
130-2 Camelot Drive
Plymouth, MA 02360

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

R Hollis Jr./JILL

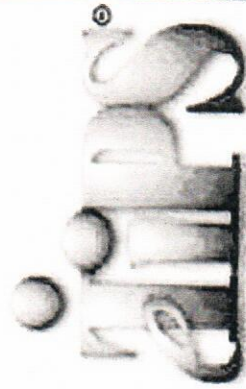
Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 3.0
For coursework completed on August 21, 2017
provided by Health Communications, Inc.
is hereby granted to:

Paul Nixon

Certification to be sent to:

**Independent Fermentations Brewing
54 Pawtuxet Rd
Plymouth MA, 02360-1422 USA**



HEALTH COMMUNICATIONS INC.

This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.



Town of Hanover, MA

Conservation Commission Permit

550 Hanover Street Hanover, MA 02339
Phone: 781-826-6505 Fax: 781-826-5950



Permit No #: C-18-11

Date Received: 12/21/2017

2/27/2018

SECTION 1 : SITE INFORMATION

Date

1.1 Property Address

(253 ELM ST) Luddams Ford

1.2 Assessors Map & Parcel Number

72-033

Applicant: William Stanton

1.4 Property Dimensions

598950

Lot Area

Frontage (ft)

1.5 Building Setbacks (ft)

Front Yard		Side Yard		Rear Yard	
Required	Provided	Required	Provided	Required	Provided
0.00	0.00	0.00	0.00	0.00	0.00

SECTION 2: PROPERTY OWNERSHIP/AUTHORIZED AGENT

Owner of Record

TOWN OF HANOVER

550 HANOVER ST

HANOVER MA

Name

Address

Signature

SECTION 3: Description of Proposed Work

Permit For: Conservation Parcel Event Permit

Brief Description of Proposed Work:

Great River Race- Kayak and Canoe Race on the North River with base at Luddams Ford Park.

Contact Name: Bill Stanton, GRR Chairman

Date: Saturday, August 11, 2018

Time: noon to 4 pm

Attendance: 125

No. vehicles: 75

No. drop offs: 25

Family/Picnic Style food

Porta potty on site

BBQ/cook stoves on site



SECTION 4: Estimated Construction Costs

Total Project Cost : \$0.00

Payment #:

Total Permit Fee:

Payment Type:

288721

5-7017/2110

1454

LINDSEY E JEVNE
30 PLEASANT STREET
#2
PLYMOUTH, MA 02360

DATE 5/16/18

PAY TO THE ORDER OF Town of Hanover \$ 40.00
forty 00/100 DOLLARS

Security Features
Included
Details on Back

Citizens Bank®

MEMO NJWA Higher Level



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